

07-30-04

PART B - FEE(S) TRANSMITTAL

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21874 7590 05/12/2004

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Michelle P. Chicos

(Depositor's name)

Michelle P. Chicos

(Signature)

July 28, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/047,835	01/14/2002	Sien-Chun Chou	56868 (71987)	5690

TITLE OF INVENTION: METHOD FOR RECOVERING AND PRODUCING C4-C6 DICARBOXYLATE FROM ALKALINE WASTE SOLUTION GENERATED IN CAPROLACTAM PREPARATION PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/12/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
OH, TAYLOR V	1625		562-524000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Peter F. Corless
 2 John B. Alexander, Ph.D.
 3 Edwards & Angell, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Chemaxx International Corporation

Taiwan, R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee
 Advance Order - # of Copies 3

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A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)  (Date) 7/28/2004

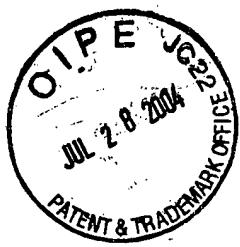
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08/02/2004 GWORD0F2 00000127 10047835

01 FC:1501	1330.00
02 FC:1504	300.00
03 FC:8001	9.00



Practitioner's Docket No. 56868 (71987)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: S.-C. Chou
U.S.S.N.: 10/047,835
FILED: January 14, 2002
FOR: METHOD FOR RECOVERING AND PRODUCING C₄-C₆
DICARBOXYLATE FROM ALKALINE WASTE SOLUTION GENERATED
IN CAPROLACTAM PREPARATION PROCESS

Mail Stop Issue Fee
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**TRANSMITTAL OF PAYMENT OF ISSUE FEE
(37 C.F.R. SECTION 1.10)**

CERTIFICATION UNDER 37 C.F.R. 1.10*

(Express Mail label number is mandatory.)

(Express Mail certification is optional.)

I, the undersigned, do hereby certify that I have on the date set below, deposited this document and all related documents with the United States Postal Service, in an envelope as "Express Mail Post Office to Addressee," mailing Label Number EV438971519US addressed to the Commissioner for Patents, U.S. Patent & Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: July 28, 2004

By: _____

Michelle P. Chicos

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL - 85.
2. Fee (37 C.F.R. section 1.18(a) and (b)):

Application status is: **Regular**

<input type="checkbox"/>	small business entity fee	<input type="checkbox"/>	\$ 665.00
<input type="checkbox"/>	statement attached		
<input type="checkbox"/>	statement filed on _____		
<input checked="" type="checkbox"/>	other than a small entity fee	<input checked="" type="checkbox"/>	\$1,330.00

3. Publication fee \$ 300.00
4. Advanced order of soft copies of patent fee \$ 9.00

Fees Enclosed: **\$1,639.00**



PAYMENT OF FEES

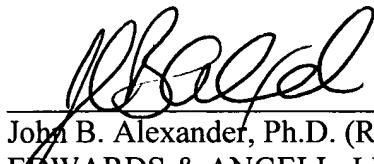
Enclosed please find a check for \$1,639.00.

Charge Account 04-1105 for any fee deficiency.

Charge Account _____ the sum of \$ _____.

A duplicate of this request is attached.

Respectfully submitted,


John B. Alexander, Ph.D. (Reg. No. 48,399)
EDWARD & ANGELL, LLP
P.O. Box 55874
Boston, MA 02205

Tel. No. (617) 439-4444
Fax. No. (617) 439-4170

Customer No. 21874

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